Name/HI Number	M+C Org. /System/ EGHP Error?	Effective Enrollment Date	Signature Date	Date M+CO Received?	Retroactive Enrollment Correct?	Lock-In Statement?	Comments

Standard: 95 percent correct.

Determination: Transfer results of this sample to the appropriate requirements at EN01, and EN17 - EN20 of the *Review Guide*. See Column Explanations for coded requirements related to specific columns.

WS-EN4

RETROACTIVE ENROLLMENTS FOR EMPLOYER GROUP HEALTH PLAN (EGHP) ENROLLEES

Requirement: In accordance with 42CFR422.60(f), the M+CO may retroactively enroll Medicare applicants of EGHPs up to a period of 90 days.

Purpose: To determine whether the M+CO retroactively enrolls Medicare applicants who are members of EGHP up to a period of 90 days.

(**NOTE**: When the M+CO has attempted to convert EGHP commercial members to its Medicare M+CO, but the Medicare entitlement records are not established and the accretion rejects, or when the EGHP is late in notifying the M+CO of the enrollee's intent to disenroll, does the M+CO notify HCFA of retroactive enrollments? The enrollment is input no later than 90 days following the intended effective date, and the M+CO has obtained a lock-in statement from the applicant (either through the application or on a separate form)).

<u>Sample:</u> The reviewer will develop the universe to include all retroactive enrollments submitted by the M+CO to HCFA during the six month period ending with the month prior to the month of the scheduled visit. These are identified by Transaction Code 60 - enrollments on the *HCFA Monthly Transaction Reply/Monthly Activity Report* listings. From this universe, the reviewer will select 30 cases from the report in accordance with random selection methods discussed in the Review Guide Instructions, under Sampling Methodology. (*Note: During focused reviews, HCFA staff may elect to increase sample sizes to 100 cases or more, as deemed appropriate by the Agency.*) Three to five days (3-5) before the site visit, the reviewer will notify the M+CO of the 30 cases to be pulled. If the sample pulled does not provide enough concrete data on the procedures followed by the M+CO in correctly handling retroactive enrollments, then increase the number of files to be reviewed.

<u>Instructions</u>: Pull enrollee files and other information (e.g., EGHP notices the M+CO on commercial member activity) to ascertain how the M+CO handled the retroactive enrollment process and if lock-in statements were obtained from applicants.

Column Explanations:

Name/HI Number: Self-explanatory.

M+C Organization/System/EGHP Error? Was the need for retroactive enrollment due to an M+CO oversight, a HCFA Systems problem (i.e., no record of Part B entitlement), or due to the EGHP (i.e., late notification of the enrollee's intent to enroll)?

Effective Enrollment Date: Self-explanatory. **Signature Date:** Date application was signed.

Date M+CO Received: Date M+CO received the application.

Retroactive Enrollment Correct? Was the retroactive enrollment correct? If the M+CO was not able to process the application in a timely manner to effectuate the transition with no break in enrollment, verify if a retroactive enrollment was processed through HCFA. Did the M+CO process the enrollment accurately (i.e., enroll no earlier effective date than the first of the month after the receipt of lock-in was acknowledged)? **Transfer result to EN18.**

Lock-In Statement? Was there a lock-in statement on file? Verify if either on the application for the Medicare *M+CO* or on some other document, applicants were informed of their obligation to receive services from in-plan providers and had an opportunity to acknowledge understanding by signing and dating the form.

Transfer result to EN18. Comments: Self-explanatory.

*Note: All units of analysis **must** be for EGHP enrollees. If some units of analysis are not EGHP, **M+CO** is inappropriately enrolling applicants; this information should be considered in making determination at AM02 &EN08 in Section I, Administration and Management.